

ORDER OF PURCHASE IN WAREHOUSE

NAME	JOSEPH E. TRAFLET	ADDRESS	10000 W. 10TH AVE.
COMPANY	THOMSON MULTIMEDIA LICENSING INC	CITY	MINNEAPOLIS
STATE	MINN	ZIP	55425
PHONE	612-338-1111	FAX	612-338-1111
ATTN	JOSEPH E. TRAFLET	DATE	10/10/91
QUANTITY	1	UNIT	EA
DESCRIPTION	VIDEO PROCESSING APPARATUS		

NAME: JOSEPH E. TRAFLET
 COMPANY: THOMSON MULTIMEDIA LICENSING INC
 STREET: 10000 W. 10TH AVE.

CITY: MINNEAPOLIS
 STATE/COUNTRY: MN USA
 ZIP: 55425

ORDER FOR VIDEO PROCESSING APPARATUS FOR THE CONSIDERATION OF A VIDEO IMAGE
 VIDEO PROCESSING APPARATUS

END TO LAST ADDITION/DEL. SEND



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3701

SERIAL NUMBER 09/763,789	FILING DATE 02/26/2001 RULE	CLASS 358	GROUP ART UNIT 2622	ATTORNEY DOCKET NO. RCA 89175
APPLICANTS David Emery Virag, Indianapolis, IN; Peter Paul Polit, Indianapolis, IN; Thomas Anthony Stahl, Indianapolis, IN;				
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/US99/19688 08/26/1999 WHICH CLAIMS BENEFIT OF 60/097,916 08/26/1998				
** FOREIGN APPLICATIONS *****				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY IN	SHEETS DRAWING 3	TOTAL CLAIMS 13
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 3		
ADDRESS Joseph S Tripoli Thomson Multimedia Licensing Inc PO Box 5312 Princeton, NJ 08540				
TITLE Method for automatically determining the configuration of a multi-input video processing apparatus				
FILING FEE RECEIVED 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	